

**LOBBYING SUPPLEMENTAL REGISTRATION FORM**  
To be used for changes to registrations and terminations.

**Lobbyist's Registration Number**

**Instructions**

- Print in ink or type.
- Complete form and return with \$10 fee to Board of Ethics, 8401 United Plaza Blvd., Suite 200, Baton Rouge LA 70809-7017, (225) 922-1400 or (800) 842-6630.
- This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

**FOR OFFICE USE ONLY**  
Postmark Date: 3/17/97

L5app

10225f.d

1. NAME **Haynie Randy K**  
Last First MI

2. BUSINESS PHONE **225-336-4143**

3. BUSINESS ADDRESS **P.O. Box 44032, Capitol Station, Baton Rouge, LA 70804**

Street and No. City State Zip  
**1465 Ted Dunham Avenue Baton Rouge, LA 70802**

MAILING ADDRESS Street and No. City State Zip  
**Self-Employed**

4. EMPLOYER

5. EMPLOYER'S ADDRESS

Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes No

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

**AT&T**

1. Name **1133 21<sup>st</sup> Street NW Suite M100 Washington, D.C. 20036**  
Address

Business or purpose **Telecommunications**

New Representation Yes  
Does this person pay you?

If No, who pays you?

Terminated Representation as of \_\_\_\_\_

Lobbyist's Registration Number

SUPPLEMENTAL REGISTRATION FORM

2. Name

Address

Business or purpose

New Representation  
Does this person pay you?

If No, who pays you?

Terminated Representation as of

4. Name

Address

Business or purpose

New Representation  
Does this person pay you?

If No, who pays you?

Terminated Representation as of

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [L.S.A-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist